

**DOCUMENTATION FOR THE GENERIC CLEARANCE
FOR THE COLLECTION OF QUALITATIVE RESEARCH & ASSESSMENT**

TITLE OF INFORMATION COLLECTION: Partnership Meeting Questionnaire

- INTERVIEWS
- SMALL DISCUSSION GROUPS
- FOCUS GROUPS
- QUESTIONNAIRES
- OTHER (EXPLAIN:)

DESCRIPTION OF THIS SPECIFIC COLLECTION

1. Intended purpose

The Hospital Preparedness Program (HPP) enables health care systems to save lives during emergencies that exceed day-to-day capacity of the health and emergency response systems. This is accomplished through the development of regional health care coalitions (HCCs) that incentivize diverse and often competitive health care organizations with differing priorities and objectives to work together. HCCs collaborate to ensure that each member has the necessary medical equipment and supplies, real-time information, communication systems, and trained health care personnel to respond to an emergency.

As the only source of federal funding that supports regional health care system preparedness, HPP promotes a sustained national focus to improve patient outcomes, minimize the need for supplemental state and federal resources during emergencies, and enable rapid recovery. Different types of health care organizations must coordinate their responses to effectively address these emergencies. The Partnership Meeting Questionnaire will be used to determine how HPP can best engage these various stakeholders to ensure feedback is received from a diverse and comprehensive set of organizations, representing groups from across the country.

2. Need for the collection

The data collected through this query will help HPP define, develop, and implement a partnership engagement strategy that addresses both HPP's and their partner's most topical questions and needs. Information obtained through this timely data collection process will help inform:

- Topics for future partner meetings
- Methods and frequency for engaging with partners
- Additional partnering organizations that should be engaged in the Partnership Meetings

3. Planned use of the data

Results from this data collection will help HPP to execute an effective partnership engagement strategy and encourage information sharing among important stakeholders. It

will also influence the development of future meeting agendas, the selection of topics and speakers for future meetings.

4. Date(s) and location(s)

Data will be collected during the week following the partner meetings, which will be held at least quarterly. All data will be collected through an online survey.

5. Collection procedures

The data collection will be conducted through an online survey. Respondents will be informed about the data collection in person at the partnership meeting, 2015 and in an email following the meeting that will contain the link to the survey. The survey will remain open for one week following the conclusion of the meeting to allow respondents requisite time to complete it. Responses will be voluntary. When the survey is closed, the Office of the Assistant Secretary for Preparedness and Response (ASPR) and Contractor staff will analyze the data by compiling descriptive statistics and looking for overarching themes in the responses.

6. Number of collections (e.g., focus groups, surveys, sessions)

The collection will consist of an online questionnaire.

7. Description of respondents/participants

The population will be comprised of a group of 120 individuals representing a diverse group of health care organizations that attend the HPP partner meetings.

The anticipated response rate is 50 percent.

8. Description of how results will be used

The information gathered from the responses will be summarized by ASPR and the Contractor for this project. Contractor staff will pull out the main themes from the responses and provide a summary to ASPR. ASPR will then decide the implications these themes have for future partner meetings and communications.

9. Description of how results will or will not be disseminated and why or why not

The data from the completed surveys will be directed to appropriate divisions in ASPR to allow for situational knowledge and ability to tailor partnership engagement strategies based on current stakeholder needs.

AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE – None

BURDEN HOUR COMPUTATION (*Number of responses (X) estimated response or participation time in minutes (/60) = annual burden hours*):

Category of Respondent	No. of Respondents	Participation Time	Total Burden Hour
Healthcare practitioners and related occupations	120	15/60	30 hours

BURDEN COST COMPUTATION

Category of Respondent	Total Burden Hour	Wage Rate	Total
Healthcare practitioners and related occupations (ongoing)	30	36.54	\$1096.20

OTHER SUPPORTING INFORMATION

REQUESTED APPROVAL DATE: November 9, 2015

NAME OF CONTACT PERSON: Melissa Harvey, ASPR HPP Director

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DEPARTMENT/OFFICE/BUREAU: HHS/ASPR